Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 1 of 66

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF GEORGIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Paul First name Peter Middle name Salamon, Jr. Last name and Suffix (Sr., Jr., II, III)	Nancy First name Jean Middle name Salamon Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0033	xxx-xx-6847

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 2 of 66

Debtor 1 Paul Peter Salamon, Jr.
Debtor 2 Nancy Jean Salamon

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case): I have not used any business name or EINs.				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.					
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EIN	EIN				
5.	Where you live	3485 Rivers End Place	If Debtor 2 lives at a different address:				
		Buford, GA 30519 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Gwinnett					
		County	County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
Why you are choosing this district to file for bankruptcy		Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 3 of 66

Deb	otor 2 Nancy Jean Salam	non			Case number (if known)			
Par	t 2: Tell the Court About	Your Bankruptcy	Case					
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	Chapter 7						
		☐ Chapter 11						
		☐ Chapter 12						
		☐ Chapter 13						
8.	How you will pay the fee	about how	you may pay. Typica ur attorney is submit	ally, if you are paying the fee yo	k with the clerk's office in your local coupurself, you may pay with cash, cashier' alf, your attorney may pay with a credit	's check, or money		
					on, sign and attach the Application for Ir	าdividuals to Pay		
		☐ I request to	equired to, waive you	ed (You may request this option ur fee, and may do so only if yo	n only if you are filing for Chapter 7. By ur income is less than 150% of the offic	cial poverty line that		
					n installments). If you choose this option cial Form 103B) and file it with your peti			
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
		Distric	et	When	Case number			
		Distric	et	When	Case number			
		Distric	et	When	Case number			
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
		Debto	r		Relationship to you			
		Distric	ct	When	Case number, if known			
		Debto	r		Relationship to you			
		Distric	ct	When	Case number, if known			
11.	Do you rent your residence?	□ No. Go to	o line 12.					
	. 5014011001	■ Yes. Has	your landlord obtain	ed an eviction judgment agains	t you?			
		•	No. Go to line 12					
			Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and	d file it with this		

Debtor 1 Paul Peter Salamon, Jr.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 4 of 66

	otor 1 Paul Peter Salamo otor 2 Nancy Jean Salam				Case number (if known)		
Par	t 3: Report About Any Bu	ısinesses	You Own as a S	Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.				
	business.	☐ Yes.	Name and lo	cation of busi	iness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of bus	iness, if any			
	If you have more than one sole proprietorship, use a		Number, Stre	eet, City, Stat	e & ZIP Code		
	separate sheet and attach it to this petition.		Check the a	onronriate bo	x to describe your business:		
					ess (as defined in 11 U.S.C. § 101(27A))		
					Estate (as defined in 11 U.S.C. § 101(51B))		
			_		efined in 11 U.S.C. § 101(53A))		
					r (as defined in 11 U.S.C. § 101(6))		
				of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?	proceed you are	under Subchapte choosing to proce v statement, and (B).	er V so that it eed under Sul	court must know whether you are a small business debtor or a debtor choosing to can set appropriate deadlines. If you indicate that you are a small business debtor or behapter V, you must attach your most recent balance sheet, statement of operations, ne tax return or if any of these documents do not exist, follow the procedure in 11 U.S. ter 11.		
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Ba Code.				
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11.	nd	
		☐ Yes.			11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and Subchapter V of Chapter 11.	I	
Par	t 4: Report if You Own or	Have Any	/ Hazardous Pro	perty or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat	☐ Yes.					
	of imminent and identifiable hazard to public health or safety?	□ Yes.	What is the haz	card?			
	Or do you own any property that needs immediate attention?		If immediate att				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	e goods, or that must be fed, ing that needs		Where is the property?			
					Number, Street, City, State & Zip Code		

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 5 of 66

Debtor 1	Paul Peter Salamon, Jr.		
Debtor 2	Nancy Jean Salamon	Case number (if known)	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 6 of 66

	tor 1 Paul Peter Salam tor 2 Nancy Jean Salar				Case numb	er (if known)				
Part	6: Answer These Ques	tions for R	eporting Purposes							
16.	What kind of debts do you have?	16a.	Are your debts primarily con individual primarily for a person			rined in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.							
			■ Yes. Go to line 17.							
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.							
			☐ No. Go to line 16c.							
			☐ Yes. Go to line 17.							
		16c.	State the type of debts you ow	e that are not consur	mer debts or busine	ss debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7	'. Go to line 18.						
	Do you estimate that after any exempt property is excluded and	■ Yes.	are paid that funds will be avai	o you estimate that a ilable to distribute to	fter any exempt propunsecured creditors	perty is excluded and administrative expenses ?				
	administrative expenses are paid that funds will		No							
	be available for distribution to unsecured creditors?	l	☐ Yes							
18.	How many Creditors do	1 -49		1 ,000-5,000	1	1 25,001-50,000				
	you estimate that you owe?	□ 50-99		5001-10,000		□ 50,001-100,000				
		□ 100-1 □ 200-9		□ 10,001-25,0	☐ More than100,000					
19.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001		□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	□ \$50,000,00° □ \$100,000,00°	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$	50,000	□ \$1,000,001	- \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	+ /	001 - \$100,000	\$10,000,001	•	\$1,000,000,001 - \$10 billion				
		`	001 - \$500,000 001 - \$1 million	□ \$50,000,001 □ \$100,000,00	1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
Dow	Zien Balaur	Ψοσο,								
Part										
For	you		, ,	. , ,	, ,	mation provided is true and correct.				
						e, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.				
		documer	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request	relief in accordance with the ch	apter of title 11, Unite	ed States Code, spe	ecified in this petition.				
		bankrupt and 357	cy case can result in fines up to 1.		onment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
			Peter Salamon, Jr. eter Salamon, Jr.		/s/ Nancy Jean Sa					
			e of Debtor 1		Signature of Debto					
		Executed	d on September 1, 2022		Executed on Se	eptember 1, 2022				
			MM / DD / YYYY			M/DD/YYYY				

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 7 of 66

Debtor 1 Debtor 2	Paul Peter Salame Nancy Jean Salar	•	Page / of 66 Cas	Case number (if known)		
	attorney, if you are ed by one	under Chapter 7, 11, 12, or 13 of title 11, Uni	ted States Code, and have	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)		
If you are not represented by an attorney, you do not need to file this page.		and, in a case in which § 707(b)(4)(D) applie schedules filed with the petition is incorrect.	s, certify that I have no knov	vledge after an inquiry that the information in the		
		/s/ Charles M. Clapp	Date	September 1, 2022		
		Signature of Attorney for Debtor		MM / DD / YYYY		
		Charles M. Clapp 101089				
		Printed name				
		Law Offices of Charles Clapp				
		Firm name				
		5 Concourse Parkway NE				

Email address

charles@lawcmc.com

Suite 3000 Atlanta, GA 30328 Number, Street, City, State & ZIP Code

101089 GA Bar number & State

Contact phone 404-585-0040

	l in thin inform	notion to identify you				
	btor 1	nation to identify you Paul Peter Salar				
De	DIOI I	First Name	Middle Name	Last Name		
1 -	btor 2 ouse if, filing)	Nancy Jean Sala	Amon Middle Name	Last Name		
.			NORTHERN DISTRICT C			
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT O	F GEORGIA		
1	se number nown)				_	Check if this is an amended filing
	fficial Fo		Affairs for Individ	luals Filing for B	ankruptcy	04/2
info	ormation. If m	nore space is needed, n). Answer every que	ble. If two married people a attach a separate sheet to t stion. Irital Status and Where You	this form. On the top of an		
1.		r current marital statu		Lived Before		
•		r carrent maritar state				
	■ Married□ Not mar					
2.	During the la	ast 3 vears, have you	lived anywhere other than v	where you live now?		
	□ No	,				
		st all of the places you I	ived in the last 3 years. Do no	t include where you live now	ı.	
	Debtor 1:		Dates Debtor 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2
	C Ob all all a	ana Datas	lived there	_		lived there
	5 Christia Monroe, C		From-To: 2000 - April 1, 2022	■ Same as Debtor	1	Same as Debtor 1 From-To:
	es and territori	ies include Arizona, Ca	ver live with a spouse or leg lifornia, Idaho, Louisiana, Nev medule H: Your Codebtors (Off r Income	vada, New Mexico, Puerto R		
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	Il businesses, including part	time activities.	ndar years?
	□ No					
	Yes. Fill	I in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	☐ Wages, commissions, bonuses, tips	\$45,000.00	■ Wages, commissions, bonuses, tips	\$32,083.00
			Operating a business		☐ Operating a business	

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 9 of 66

Debtor 1 Paul Peter Salamon Jr.

Debtor 2 Nancy Jean Salamon					•	Case number (if known)						
					Dobtov 1	Debtor 1 Debtor 2						
					Sources	of income that apply.	(befo	s income re deductions and sions)	:	Sources of inco		Gross income (before deductions and exclusions)
			dar year: December	31, 2021)	☐ Wages bonuses, t	, commissions, tips		\$106,000.0		■ Wages, commonutes, tips	missions,	\$55,000.00
					Operat	ing a business				Operating a b	ousiness	
			dar year be December		☐ Wages bonuses, t	, commissions, tips		\$102,000.0		■ Wages, commonutes, tips	missions,	\$40,000.00
					Operat	ing a business			I	Operating a b	ousiness	
	and c winni List e	other ngs. each s	public benef If you are fili	it payments; ng a joint cas he gross inco	pensions; re se and you h		rest; divid you recei	dends; money co ved together, list	llected it only	from lawsuits; ronce under De	royalties; and btor 1.	curity, unemployment, I gambling and lottery
					Debtor 1 Sources of Describe b		each (before	s income from source re deductions and		Debtor 2 Sources of inco Describe below.		Gross income (before deductions and exclusions)
			dar year be December				exclu	sions) \$0.0	-	COVID Unemployme	nt	\$4,000.00
Pai	 No. Neither Debtor 1 nor Debtor 2 had individual primarily for a personal, During the 90 days before you filed 				's debts pri Debtor 2 has personal, fa	marily consume s primarily cons amily, or househo	er debts? umer del	ots. Consumer de				(8) as "incurred by an
			□ No. □ Yes * Subject	paid that cr not include	each creditor editor. Do no payments to		nts for do this bankı	mestic support o ruptcy case.	bligation	ons, such as chi	ild support ar	e total amount you nd alimony. Also, do
		Yes.				e primarily consum for bankruptcy, d			total of	\$600 or more?		
			No.	Go to line 7								
			□ _{Yes}	include pay								creditor. Do not nolude payments to an
	Cred	ditor'	s Name and	d Address		Dates of payme	ent	Total amount paid		Amount you still owe	Was this p	ayment for

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 10 of 66

Debtor 1 Paul Peter Salamon Jr.

De	otor 2	Nancy Jean Salamon			Cas	e number (if known)					
7.	<i>Inside</i> of whi	in 1 year before you filed for bankrupt ers include your relatives; any general pa ich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners contr	s; relatives of any general, or owner of 20% of	neral partners; partne or more of their voting	erships of which yo g securities; and a	ou are a genera ny managing a	al partner; corporations gent, including one for			
	_	No Yes. List all payments to an insider.									
	Insid	der's Name and Address	Da	tes of payment	Total amount paid	Amount you still owe	Reason for	this payment			
8.	inside	in 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos	-		yments or transfer a	any property on a	ccount of a d	ebt that benefited an			
	_	No Yes. List all payments to an insider									
		der's Name and Address	Da	tes of payment	Total amount paid	Amount you still owe	Reason for	this payment			
Pai	rt 4:	Identify Legal Actions, Repossession	ns, ar	nd Foreclosures	pulu	our owe	morado orda	into o riamo			
9.	List al	n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes. No									
		Yes. Fill in the details.	Na	ture of the case	Court or agency		Status of th	ne case			
	Case	e number			G ,						
10.		in 1 year before you filed for bankrupt k all that apply and fill in the details below		as any of your prop	erty repossessed, f	oreclosed, garnis	shed, attached	d, seized, or levied?			
	_	No. Go to line 11. Yes. Fill in the information below.									
		ditor Name and Address	De	scribe the Property		Date	Date Value of the				
			Ex	plain what happene	d		property				
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No										
		Yes. Fill in the details.	Da				action was	A			
	Cred	Creditor Name and Address Describe the action the creditor took taker						Amount			
12.		n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a			erty in the possessi	ion of an assigne	e for the bene	efit of creditors, a			
	_	No Yes									
Pa		List Certain Gifts and Contributions									
		n 2 years before you filed for bankrup	otcv. d	did vou give any gif	ts with a total value	of more than \$60	00 per person	?			
	_	No	, .	, g, g		, , , , , , , , , , , , , , , , , , ,					
		Yes. Fill in the details for each gift.		_							
		s with a total value of more than \$600 person		Describe the gifts		Date the g	s you gave ifts	Value			
		son to Whom You Gave the Gift and									

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 11 of 66

	btor 1 Paul Peter Salamon, Jr. btor 2 Nancy Jean Salamon		Case nur	nber (if known)	
14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or		did you give any gifts or contributions with a	total value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	total	Describe what you contributed	Dates you contributed	Value
Par	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankru or gambling?	uptcy o	r since you filed for bankruptcy, did you lose	anything because of the	ft, fire, other disaster,
	■ No □ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the loss e the amount that insurance has paid. List pend nce claims on line 33 of Schedule A/B: Property		Value of property lost
Par	rt 7: List Certain Payments or Transfer		·		
	consulted about seeking bankruptcy or	prepar prepare	lid you or anyone else acting on your behalf ling a bankruptcy petition? rs, or credit counseling agencies for services red Description and value of any property transferred		Amount of payment
	Abacus Credit Counseling 17337 Ventura Blvd Suite 226 Encino, CA 91316		\$26.00 - Credit Counseling	8/25/2022	\$26.00
	Law Offices of Charles Clapp 5 Concourse Parkway NE Suite 3000 Atlanta, GA 30346		\$338.00 - Filing Fee \$2,000.00 - Attorney Fee	8/26/2022	\$338.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed not include any payment or transfer that No Yes. Fill in the details.	ditors		oay or transfer any prope	erty to anyone who
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Seymour Law Firm, LLC 35 Nutmeg Dr #225, Trumbull, CT 06611		\$1,500.00 - Foreclosure Defense	8/2022	\$1,500.00

Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Case 22-56984-pmb Page 12 of 66 Document

Paul Peter Salamon, Jr. Nancy Jean Salamon Debtor 2

Case number (if known)

18.	Within 2 years before you filed for bankruptcy transferred in the ordinary course of your bus include both outright transfers and transfers mad include gifts and transfers that you have already No Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and va		Describe any property or payments received or debts paid in exchange	Date transfer was made			
	Person's relationship to you							
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No ☐ Yes. Fill in the details.		property to a se	elf-settled trust or similar device	of which you are a			
	Name of trust	Description and va	lue of the prope	rty transferred	Date Transfer was			
					made			
Par	rt 8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Stora	age Units				
20.	Within 1 year before you filed for bankruptcy,	were any financial acc	ounts or instrum	nents held in your name, or for y	our benefit, closed,			
	sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	No Yes. Fill in the details.							
	Name of Financial Institution and	ast 4 digits of account number	.		Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?							
	■ No							
	☐ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		escribe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or	place other than your I	home within 1 ye	ear before you filed for bankrupt	cy?			
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City,		Do you still have it?			
Par	rt 9: Identify Property You Hold or Control fo							
23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.								
	NoYes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Sta Code)		escribe the property	Value			
Par	rt 10: Give Details About Environmental Infor	,						

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 13 of 66

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 Paul Peter Salamon, Jr.
Debtor 2 Nancy Jean Salamon

Case number (if known)

	regulations controlling the cleanup of these substances, wastes, or material.								
	Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.								
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.								
Rep	ort a	II notices, releases, and proceedings th	nat you know about, regardless of when	hey occurred.					
24.	Has	any governmental unit notified you that	at you may be liable or potentially liable o	nder or in violation of an en	vironmental law?				
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Hav	re you notified any governmental unit of	f any release of hazardous material?						
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Hav	e you been a party in any judicial or ad	ministrative proceeding under any envir	nmental law? Include settle	ments and orders.				
	_	■ Na							
		No Yes. Fill in the details.							
	Ca	se Title	Court or agency	Nature of the case	Status of the				
	Ca	se Number	Name Address (Number, Street, City, State and ZIP Code)		case				
Pai	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	Wit	hin 4 years before you filed for bankrup	tcy, did you own a business or have any	of the following connections	s to any business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time								
		■ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to	Part 12.						
		Yes. Check all that apply above and fil	II in the details below for each business.						
		siness Name	Describe the nature of the business	Employer Identification					
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Name of accountant or bookkeeper Dates business existed					
	Ca	Castle Partners LLC Pass Through Entity (Unused) EIN:							

From-To 11/2020 - Present

5 Christianna Drive

Monroe, CT 06468

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 14 of 66

Debtor	1 Paul Peter Salamon, Jr.	_
Debtor	2 Nancy Jean Salamon	Case number (if known)
	thin 2 years before you filed for bank titutions, creditors, or other parties.	ruptcy, did you give a financial statement to anyone about your business? Include all financial
	No Yes. Fill in the details below.	
Ac	ame ddress umber, Street, City, State and ZIP Code)	Date Issued
Part 12	Sign Below	
with a b 18 U.S.0		ng a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both. /s/ Nancy Jean Salamon
	Peter Salamon, Jr.	Nancy Jean Salamon
	ure of Debtor 1	Signature of Debtor 2
Date	September 1, 2022	Date September 1, 2022
Did you	attach additional pages to Your Stat	rement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
Did you	pay or agree to pay someone who is	not an attorney to help you fill out bankruptcy forms?
■ No		

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 15 of 66

			Doc	ument	Page 15 of 66			
Fill in this infor	mation to identify yo	ur case and th	is filing	g:				
Debtor 1	Paul Peter Sala	mon. Jr.						
	First Name		Name		Last Name			
Debtor 2 (Spouse, if filing)	Nancy Jean Sa First Name		Name		Last Name			
United States Ba	ankruptcy Court for the	NORTHER	ו פום או	RICT OF GEO	RGIA			
Case number _					-			☐ Check if this is an
							1	amended filing
O(() - (- 1	400A/D							
	orm 106A/B							
Schedul	<u>le A/B: Pro</u>	perty						12/15
	e Each Residence, Build							
1. Do you own or	have any legal or equita	ble interest in a	ny resid	lence, building,	land, or similar property?			
☐ No. Go to Pa	ırt 2.							
Yes. Where	is the property?							
					_			
1.1 5 Christia	anna Drive		What		? Check all that apply			
	, if available, or other descripti	on	■ Single-family home □ Duplex or multi-unit building			Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule</i>		d claims on Schedule D:
				Condominium or cooperative		Creditors V	ditors Who Have Claims Secured by Property.	
				Manufactured	or mobile home			
Monroe	CT 0	6468-0000		Land	of mobile nome	Current va		Current value of the portion you own?
City	State	ZIP Code		Investment pro	pperty		60,000.00	\$560,000.00
				Timeshare		Describe t	he nature of y	our ownership interest
			□ Who		in the property? Check one	•	ch as fee simple, tenancy by the entireties, o e estate), if known.	
				Debtor 1 only		Fee Sim	ple	
Fairfield								
County	County			Debtor 1 and D	=			munity property
			☐ Othe		the debtors and another ou wish to add about this ite	(structions) ocal	
			prop	erty identification	on number:			
					rom Part 1, including any			\$560,000.00
pages you h	have attached for Par	t 1. Write that	numbe	r here			.=>	φυσυ,θυσι.σσ

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 16 of 66

Debli	or 1 Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number (if known)	
3. Ca □ I	rs, vans, trucks, tractors, sport utility v	ehicles, motorcycles		
0.4	Make: Saab	When here are interest in the annual O	Do not deduct secured of	claims or exemptions. Put
3.1	Make: Saab Model: 9-3 Linear	Who has an interest in the property? Check one Debtor 1 only	the amount of any secur	ed claims on Schedule D: nims Secured by Property.
	Year: 2003	☐ Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 140,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
		Check if this is community property (see instructions)	\$2,000.00	\$2,000.00
3.2	Make: VW	Who has an interest in the property? Check one		claims or exemptions. Put
0.2	Model: Passat SE	Debtor 1 only		ed claims on Schedule D: nims Secured by Property.
	Year: 2015	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 110,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	\square At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$13,250.00	\$13,250.00
ο,				
		wn for all of your entries from Part 2, including a		\$15,250.00
D	■ B			
	: Describe Your Personal and Household ou own or have any legal or equitable in			Current value of the portion you own?
	usehold goods and furnishings camples: Major appliances, furniture, linen	s, china, kitchenware		Do not deduct secured claims or exemptions.
	No			claims or exemptions.
	No Yes. Describe			
	• • •	ods		claims or exemptions.
	Yes. Describe	ods		

Official Form 106A/B Schedule A/B: Property page 2

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 17 of 66

	ebtor 1 Paul Peter Salamon, Jr. ebtor 2 Nancy Jean Salamon	Case number (if known)	
8.		other artwork; books, pictures, or other art objects; stamp, coin,	, or baseball card collections;
	other collections, memorabilia, collectibles No		
	☐ Yes. Describe		
9.	musical instruments	obby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
	■ No □ Yes. Describe		
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and r ■ No	related equipment	
	☐ Yes. Describe		
11.	. Clothes Examples: Everyday clothes, furs, leather coats, desig ■ No	gner wear, shoes, accessories	
	☐ Yes. Describe		
12.	□ No	ement rings, wedding rings, heirloom jewelry, watches, gems, ç	gold, silver
	Yes. Describe		
	Wedding Ring		\$500.00
	 Non-farm animals Examples: Dogs, cats, birds, horses No Yes. Describe Any other personal and household items you did n No 	not already list, including any health aids you did not list	
	☐ Yes. Give specific information		
15	5. Add the dollar value of all of your entries from Pa for Part 3. Write that number here	art 3, including any entries for pages you have attached	\$2,300.00
Da	art 4: Describe Your Financial Assets		
	o you own or have any legal or equitable interest in a	any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	. Cash Examples: Money you have in your wallet, in your hon ■ No	me, in a safe deposit box, and on hand when you file your petiti	on
	☐ Yes		
17.	institutions. If you have multiple accounts v	unts; certificates of deposit; shares in credit unions, brokerage l with the same institution, list each.	nouses, and other similar
	□ No ■ Yes	Institution name:	
	17.1. Checking	Truist Bank NA Account is Negative	\$0.00

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 18 of 66

Debtor 1 Debtor 2		Paul Peter Salamon, Jr. Nancy Jean Salamon				Case number (if known)		
			17.2.	Checking	Green Dot Bank NA			\$5,000.00
			17.3.	Checking/Savings	Peoples Bank NA			\$2,200.00
			17.4.	Checking	Bank of America			\$1,600.00
18.				cly traded stocks ent accounts with brokera	age firms, money market acco	ounts		
	☐ Yes			Institution or issuer nam	e:			
19.	joint v □ No	venture			ed and unincorporated busi	inesses, including an	interest in an LLC	C, partnership, and
	■ Yes.	Give specific in		about themme of entity:		% of ownership):	
			Ca	stle Partners, LLC		100	%	\$10.00
21.	Exam _l ■ No	ment or pension of the state of	on accoun n IRA, ERIS	SA, Keogh, 401(k), 403(t	o), thrift savings accounts, or o	other pension or profit-s	sharing plans	
				of account:	Institution name:			
22.	Your s Examp		sed deposi	ts you have made so tha	t you may continue service or ic utilities (electric, gas, water		companies, or othe	ers
	■ No □ Yes.				Institution name or individu	ual:		
23.	Annuit	ies (A contract	for a perio	dic payment of money to	you, either for life or for a nur	mber of years)		
	☐ Yes		lssuer nam	ne and description.				
24.	26 U.S.	ts in an educat C. §§ 530(b)(1)			ied ABLE program, or unde	er a qualified state tuit	ion program.	
	■ No □ Yes		Institution r	name and description. Se	eparately file the records of ar	ny interests.11 U.S.C. §	521(c):	
25.		, equitable or f	uture inte	rests in property (other	than anything listed in line	1), and rights or pow	ers exercisable fo	or your benefit
	■ No □ Yes.	Give specific in	nformation	about them				
26.	Examp				ther intellectual property rom royalties and licensing ag	reements		
	■ No □ Yes.	Give specific in	nformation	about them				

Official Form 106A/B Schedule A/B: Property page 4

Debtor Debtor		Paul Peter Salam Nancy Jean Salar			Case number (if known)	
27. Lic	enses	, franchises, and ot	her general intangibles	ssociation holdings	 liquor licenses, professional license	
		s. Building permits, e	saciosive licerises, cooperative a	ssociation noidings,	, liquol licerises, professional licerise	5
•		ive specific informati	on about them			
Money	or pro	operty owed to you	?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	No	ds owed to you				
□ Y	∕es. Gi	ve specific information	on about them, including whether	r you already filed th	ne returns and the tax years	
	<i>cample.</i> No			nild support, mainte	nance, divorce settlement, property s	ettlement
Ex ■ N	<i>cample:</i> No		ability insurance payments, disa vans you made to someone else	bility benefits, sick p	pay, vacation pay, workers' compens	sation, Social Security
	cample.	in insurance policions: Health, disability, o		account (HSA); cred	dit, homeowner's, or renter's insuranc	e
□ Y	∕es. Na		empany of each policy and list its Company name:	value.	Beneficiary:	Surrender or refund value:
If y so ■ N	you are meone No	the beneficiary of a has died.			olicy, or are currently entitled to recei	ve property because
	es. G	ive specific informati	on			
	cample.		whether or not you have filed ment disputes, insurance claims		a demand for payment	
ΠY	es. D	escribe each claim				
	٧o		•	including counter	claims of the debtor and rights to	set off claims
ΠY	es. D	escribe each claim				
35. An ; ■ N	-	icial assets you did	not already list			
	es. G	ive specific informati	on			
			of your entries from Part 4, inc er here			\$8,810.00
Part 5:	Descr	ibe Any Business-Rel	ated Property You Own or Have ar	n Interest In. List any	real estate in Part 1.	
37. Do y	you ow	n or have any legal or	equitable interest in any business	-related property?		
`	o. Go to		-	. · ·		

Official Form 106A/B Schedule A/B: Property page 5

☐ Yes. Go to line 38.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 20 of 66

	Docume	IIL Faye 20 UI	00	
Debto Debto			Case number (if known)	
Part 6	Describe Any Farm- and Commercial Fishing-Related Property If you own or have an interest in farmland, list it in Part 1.	You Own or Have an Intere	st In.	
46. D o	o you own or have any legal or equitable interest in any fa	rm- or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That	You Did Not List Above		
	o you have other property of any kind you did not already examples: Season tickets, country club membership	list?		
	,			
_	Yes. Give specific information			
_			<u> </u>	
54. <i>A</i>	Add the dollar value of all of your entries from Part 7. Write	e that number here	<u> </u>	\$0.00
Part 8	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$560,000.00
56. F	Part 2: Total vehicles, line 5	\$15,250.00		
57. F	Part 3: Total personal and household items, line 15	\$2,300.00		
58. F	Part 4: Total financial assets, line 36	\$8,810.00		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7: Total other property not listed, line 54	+\$0.00		
62. 1	Total personal property. Add lines 56 through 61	\$26,360.00	Copy personal property total	\$26,360.00
63. 1	Total of all property on Schedule A/B. Add line 55 + line 62			\$586.360.00

Official Form 106A/B Schedule A/B: Property page 6

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 21 of 66

Fill in this inforr					
Debtor 1	Paul Peter Salam	on, Jr.			
	First Name	Middle Name	Last Name		
Debtor 2	Nancy Jean Salar	mon			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF GEORGIA		
Case number _					
(if known)					☐ Check if this is an
					amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)						
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	2003 Saab 9-3 Linear 140,000 miles	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)		
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit			
	Wedding Ring Line from Schedule A/B: 12.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)		
	Line from Schedule AVB: 12.1			100% of fair market value, up to any applicable statutory limit			
	Checking/Savings: Peoples Bank NA Line from Schedule A/B: 17.3	\$2,200.00		\$2,200.00	11 U.S.C. § 522(d)(5)		
	Line Irom Schedule AVB. 11.3			100% of fair market value, up to any applicable statutory limit			
	Checking: Bank of America Line from Schedule A/B: 17.4	\$1,600.00	•	\$1,600.00	11 U.S.C. § 522(d)(5)		
	Line nom Schedule AVD. 17.4			100% of fair market value, up to any applicable statutory limit			
	Castle Partners, LLC 100 % ownership	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)		
	Line from Schedule A/B: 19.1			100% of fair market value, up to any applicable statutory limit			

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 22 of 66

Debtor 1 Debtor 2	Paul Peter Salamon, Jr. Nancy Jean Salamon	Case number (if known)	
	you claiming a homestead exemption of more than \$189,050? ject to adjustment on 4/01/25 and every 3 years after that for cases filed on No	or after the date of adjustment.)	
	Yes. Did you acquire the property covered by the exemption within 1,215 d ☐ No ☐ Yes	ays before you filed this case?	

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 23 of 66

Debtor 1 Paul Peter Salamon, Jr. First Name Middle Name Last Name Last Name Last Name Last Name Last Name Middle Name Last Name	
First Name Middle Name Last Name Debtor 2 (Spouse if, filing) First Name Middle Name Last Name	
Debtor 2 (Spouse if, filing) Nancy Jean Salamon First Name Middle Name Last Name	
(Spouse if, filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
,	
Case number	
(if known) Check if thi	is is an
amended fi	iling
Official Form 106D	
Schedule D: Creditors Who Have Claims Secured by Property	12/15
Schedule B. Creditors who have claims Secured by Froperty	12/13
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name ar	
number (if known).	
1. Do any creditors have claims secured by your property?	
☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.	
Yes. Fill in all of the information below.	
Part 1: List All Secured Claims	
2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately Column A Column B Column B	olumn C
much as possible, list the claims in alphabetical order according to the creditor's name. Do not deduct the that supports this po	nsecured ortion any
Connecticut Dept of \$23,467,00 \$560,000,00	\$22,467.00
Revenue Describe the property that secures the claim: \$22,407.00 \$300,000.00	φ 22,407.00
Creditor's Name 5 Christianna Drive Monroe, CT 06468 Fairfield County	
450 Columbus Blvd. Ste	
As of the date you file, the claim is: Check all that apply.	
Hartford, CT 06103	
Number, Street, City, State & Zip Code Unliquidated	
Who owes the debt? Check one. Disputed Nature of lien. Check all that apply.	
■ Debtor 1 only ☐ An agreement you made (such as mortgage or secured car loan) ☐ Debtor 2 only	
□ Debtor 1 and Debtor 2 only □ Statutory lien (such as tax lien, mechanic's lien) □ At least one of the debtors and another □ Judgment lien from a lawsuit	
Check if this claim relates to a community debt Check if this claim relates to a community debt Check if this claim relates to a community debt	

4354

Last 4 digits of account number

Date debt was incurred 5/2022

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 24 of 66

Debtor 1 Paul Peter			Case number (if known)		
First Name	Middle N	ame Last Name			
Debtor 2 Nancy Jea	In Salamon Middle N	ame Last Name			
r not reamo	daio 11	2001.141.110			
2.2 NATIONSTAR MORTGAGE L	LC	Describe the property that secures the claim:	\$719,461.00	\$560,000.00	\$159,461.00
Creditor's Name		5 Christianna Drive Monroe, CT 06468 Fairfield County			
350 HIGHLAND HOUSTON, TX		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
Number, Street, City, S	iale & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.			
■ Debtor 1 only		■ An agreement you made (such as mortgage or s	agurad		
Debtor 2 only		car loan)	ecured		
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the deb	•	☐ Judgment lien from a lawsuit			
☐ Check if this claim re		☐ Other (including a right to offset)			
community debt					
Date debt was incurred	Opened 12/22/2006 Last Active 9/30/2021	Last 4 digits of account number 0033	<u> </u>		
SANTANDER					
2.3 CONSUMER U		Describe the property that secures the claim:	\$9,748.00	\$13,250.00	\$0.00
774		Describe the property that secures the claim: 2015 VW Passat SE 110,000 miles	\$9,748.00	\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N	IONS FWY	2015 VW Passat SE 110,000 miles As of the date you file, the claim is: Check all that apply.	\$9,748.00	\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 7	10NS FWY 5247	2015 VW Passat SE 110,000 miles As of the date you file, the claim is: Check all that apply. Contingent	\$9,748.00	\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N	10NS FWY 5247	2015 VW Passat SE 110,000 miles As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$9,748.00	\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 7	MONS FWY 5247 tate & Zip Code	2015 VW Passat SE 110,000 miles As of the date you file, the claim is: Check all that apply. Contingent	\$9,748.00	\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 79 Number, Street, City, S	MONS FWY 5247 tate & Zip Code	2015 VW Passat SE 110,000 miles As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed		\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 75 Number, Street, City, S Who owes the debt? C Debtor 1 only	MONS FWY 5247 tate & Zip Code heck one.	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or seemed)		\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 75 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2	MONS FWY 5247 tate & Zip Code heck one.	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ■ An agreement you made (such as mortgage or s car loan) ☐ Statutory lien (such as tax lien, mechanic's lien)		\$13,250.00	\$0.00
2.3 CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 75 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only	MONS FWY 5247 tate & Zip Code heck one. only tors and another	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ■ An agreement you made (such as mortgage or s car loan)		\$13,250.00	\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 75 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the deb Check if this claim re	MONS FWY 5247 tate & Zip Code heck one. only tors and another	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ☐ An agreement you made (such as mortgage or s car loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit	ecured	\$13,250.00	\$0.00
2.3 CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 7: Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debt Check if this claim recommunity debt	MONS FWY 5247 tate & Zip Code heck one. only tors and another lates to a Opened 7/29/2021 Last Active	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	ecured	\$13,250.00	\$0.00
2.3 CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 7: Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 At least one of the debt Check if this claim recommunity debt	MONS FWY 5247 tate & Zip Code heck one. only tors and another elates to a Opened 7/29/2021 Last Active 7/1/2022	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as mortgage or scar loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Last 4 digits of account number 6847	ecured		\$0.00
CONSUMER U Creditor's Name 8585 N STEMN STE 1100 N DALLAS, TX 75 Number, Street, City, S Who owes the debt? C Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 At least one of the debt Check if this claim recommunity debt Date debt was incurred	MONS FWY 5247 tate & Zip Code heck one. only tors and another lates to a Opened 7/29/2021 Last Active 7/1/2022	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply. ■ An agreement you made (such as mortgage or scar loan) ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)	ecured	00	\$0.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Write that number here:

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main

	•	<u>Document</u> Pag	ge 25 of 6	00	_	
Fill in this info	ormation to identify your case:					
Debtor 1	Paul Peter Salamon, Jr.					
		Middle Name Last I	Name			
Debtor 2	Nancy Jean Salamon					
(Spouse if, filing)	First Name	Middle Name Last I	Name			
United States I	Bankruptcy Court for the: NOR	THERN DISTRICT OF GEORGI	A			
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official Fo	rm 106E/F					
		lova Upaaaurad Clai	mo			12/15
	E/F: Creditors Who F and accurate as possible. Use Part 1				IDDIODITY - L	
Schedule D: Cre	ecutory Contracts and Unexpired Leaditors Who Have Claims Secured by Continuation Page to this page. If you	Property. If more space is needed	, copy the Part	t you need, fill it out,	number the entries in	n the boxes on the
name and case r	number (if known).					
	number (if known). : All of Your PRIORITY Unsecure	d Claims				
Part 1: List	,					
Part 1: List	All of Your PRIORITY Unsecure					
Part 1: List	All of Your PRIORITY Unsecure					
Part 1: List 1. Do any cred No. Go to Yes. 2. List all of you identify what possible, list	All of Your PRIORITY Unsecure	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have	nat claim here a re more than tw	and show both priority	and nonpriority amount	ts. As much as
Part 1: List 1. Do any crec □ No. Go to □ Yes. 2. List all of you identify what possible, list Part 1. If mo	the claims in alphabetical order accord	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3	nat claim here a ve more than tw	and show both priority	and nonpriority amount laims, fill out the Contin	ts. As much as nuation Page of Nonpriority
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an expl.)	chall of Your PRIORITY Unsecured ditors have priority unsecured claims of Part 2. Sour priority unsecured claims. If a creat type of claim it is. If a claim has both put the claims in alphabetical order according than one creditor holds a particular of anation of each type of claim, see the interpretation of the control of the claim is a control of the claims in alphabetical order according that one creditor holds a particular of anation of each type of claim, see the interpretation is a control of the control	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instructions	nat claim here a re more than tw tion booklet.)	and show both priority and show both priority unsecured c	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn	children and the control of the cont	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have alaim, list the other creditors in Part 3	nat claim here a re more than tw tion booklet.)	and show both priority and priority and priority unsecured c	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C	chall of Your PRIORITY Unsecured ditors have priority unsecured claims of Part 2. The priority unsecured claims. If a creative of claim it is. If a claim has both put the claims in alphabetical order according than one creditor holds a particular of anation of each type of claim, see the interest of the priority of	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instructions	nat claim here a re more than two . tion booklet.)	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of you identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C Hartfo	chitors have priority unsecured claims of Part 2. Sour priority unsecured claims. If a creative of claim it is. If a claim has both put the claims in alphabetical order according than one creditor holds a particular of anation of each type of claim, see the increditor's Name columbus Blvd, Ste 1 ord, CT 06103	editor has more than one priority uns riority and nonpriority amounts, list the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instructions for this form account num. **Last 4 digits of account num** When was the debt incurred**	nat claim here a re more than two tion booklet.) ber 2019 - 2	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of you identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C Hartfo	chall of Your PRIORITY Unsecured ditors have priority unsecured claims of Part 2. The priority unsecured claims. If a creative of claim it is. If a claim has both put the claims in alphabetical order according than one creditor holds a particular of anation of each type of claim, see the interest of the priority of	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have alaim, list the other creditors in Part 3 instructions for this form in the instructions for this form account num. Last 4 digits of account num. When was the debt incurred. As of the date you file, the cl.	nat claim here a re more than two tion booklet.) ber 2019 - 2	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of you identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C Hartfo	chitors have priority unsecured claims of Part 2. Sour priority unsecured claims. If a creat type of claim it is. If a claim has both part the claims in alphabetical order according that one creditor holds a particular of anation of each type of claim, see the interest of the control of th	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instructions for this form account num. Last 4 digits of account num. When was the debt incurred. As of the date you file, the cl	nat claim here a re more than two tion booklet.) ber 2019 - 2	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an exploration) Priority 450 C Hartfo Numbe Who incur	call of Your PRIORITY Unsecured claims of Part 2. The priority unsecured claims. If a creative of claim it is. If a claim has both put the claims in alphabetical order accorder than one creditor holds a particular of anation of each type of claim, see the increase of the control of the con	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instruction. Last 4 digits of account num When was the debt incurred. As of the date you file, the claim continued in the claim continue	nat claim here a re more than two tion booklet.) ber 2019 - 2	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an exploration) 2.1 Conn Priority 450 C Hartfor Number Who incur Debtor	chitors have priority unsecured claims of Part 2. Sour priority unsecured claims. If a creat type of claim it is. If a claim has both put the claims in alphabetical order according that one creditor holds a particular of anation of each type of claim, see the interest of the control of the	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have alaim, list the other creditors in Part 3 instructions for this form in the instruction. Last 4 digits of account num When was the debt incurred. As of the date you file, the cl. Contingent Unliquidated Disputed	nat claim here a re more than two tion booklet.) ber 2019 - 2 aim is: Check a	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of you identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C Hartfo Numbe Who incur Debtor Debtor	call of Your PRIORITY Unsecured ditors have priority unsecured claims of Part 2. The priority unsecured claims. If a creat type of claim it is. If a claim has both put the claims in alphabetical order according than one creditor holds a particular of anation of each type of claim, see the increase of the priority of	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instruction. Last 4 digits of account num When was the debt incurred. As of the date you file, the claim continued in the claim continue	nat claim here a re more than two. tion booklet.) ber 2019 - 2 aim is: Check a	and show both priority and show both priority unsecured control claim \$12,000.00	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C Hartfo Numbe Who incur Debtor Debtor At least	chitors have priority unsecured claims of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Source than one creditor holds a particular of Part 2. Source of Pa	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have claim, list the other creditors in Part 3 instructions for this form in the instruction. Last 4 digits of account num When was the debt incurred. As of the date you file, the claim continued in the continuent	nat claim here a re more than two. tion booklet.) ber 2019 - 2 aim is: Check a	Total claim \$12,000.00 2021 all that apply	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of your identify what possible, list Part 1. If mo (For an exploration of the company of the comp	call of Your PRIORITY Unsecured ditors have priority unsecured claims of Part 2. The priority unsecured claims. If a creat type of claim it is. If a claim has both put the claims in alphabetical order according than one creditor holds a particular of anation of each type of claim, see the increase of the priority of	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have alaim, list the other creditors in Part 3 instructions for this form in the instruction. Last 4 digits of account num When was the debt incurred. As of the date you file, the classification in the instruction in the instr	nat claim here a re more than two tion booklet.) ber 2 2019 - 2 aim is: Check a	Total claim \$12,000.00 2021 all that apply	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount
Part 1: List 1. Do any crec No. Go to Yes. 2. List all of ye identify what possible, list Part 1. If mo (For an expl.) 2.1 Conn Priority 450 C Hartfe Numbe Who incur Debtor Debtor At least Check	chitors have priority unsecured claims of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Sour priority unsecured claims. If a creative of Part 2. Source than one creditor holds a particular of Part 2. Source of Pa	editor has more than one priority uns riority and nonpriority amounts, list the ling to the creditor's name. If you have alaim, list the other creditors in Part 3 instructions for this form in the instruction. Last 4 digits of account num When was the debt incurred. As of the date you file, the classification of the priority in the priority in the classification of the priority in the prior	nat claim here a re more than two tion booklet.) ber 2 2019 - 2 aim is: Check a	Total claim \$12,000.00 2021 all that apply	and nonpriority amount laims, fill out the Contir Priority amount	ts. As much as nuation Page of Nonpriority amount

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 26 of 66

	btor 1 Paul Peter Salamon, Jr.		Cana a	`		
Dei	otor 2 Nancy Jean Salamon		Case number (if kn	own)		
2.2	Georgia Department of Revenue	Last 4 digits of account number	r	\$0.00	\$0.00	\$0.00
	Priority Creditor's Name Bankruptcy Section 1800 Century Blvd NE Ste 9100	When was the debt incurred?				
	Atlanta, GA 30345 Number Street City State Zip Code	As of the date you file, the clain	n is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	■ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts	you owe the government			
	Is the claim subject to offset?	Claims for death or personal in	njury while you were intox	icated		
	No	Other. Specify				
	Yes	Notice On	ly			
2.3		Last 4 digits of account number	r \$45,	,000.00	\$45,000.00	\$0.00
	Priority Creditor's Name Centralized Insolvency Opera PO Box 7346 Philodolphia BA 10101 7346	When was the debt incurred?	2019 - 2021			
	Philadelphia, PA 19101-7346 Number Street City State Zip Code	As of the date you file, the clain	n is: Check all that apply			
	Who incurred the debt? Check one.	☐ Contingent				
	☐ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	■ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts	you owe the government			
	Is the claim subject to offset?	☐ Claims for death or personal in	njury while you were intox	icated		
	No	Other. Specify				
	☐ Yes	Unpaid Ta	axes			
Par	rt 2: List All of Your NONPRIORITY Unsec	ured Claims				
3.	Do any creditors have nonpriority unsecured clair	ns against you?				
	☐ No. You have nothing to report in this part. Submit	t this form to the court with your other	schedules.			
	■ Yes.					
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each the analysis and the product of the control of t	claim. For each claim listed, identify w	hat type of claim it is. Do	not list claim	ns already included in Par	t 1. If more

Total claim

Part 2.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 27 of 66

Debtor Debtor	Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number (if known)	
4.1	ATLANTIC COLLECTION	Last 4 digits of account number	6847	\$255.00
	Nonpriority Creditor's Name 194 BOSTON POST RD E LYME, CT 06333	When was the debt incurred?	Opened 10/6/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Unpaid		
4.2	BARCLAYS BANK DELAWA Nonpriority Creditor's Name	Last 4 digits of account number	6847	\$361.00
	125 S WEST ST WILMINGTON, DE 19801	When was the debt incurred?	Opened 4/13/2021 Last Active 7/1/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	umber Street City State Zip Code As of the date you file, the claim is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
4.3	CREDIT COLLECTION SERVICE Nonpriority Creditor's Name	Last 4 digits of account number	0033	\$4,972.00
	PO BOX 607 NORWOOD, MA 02062	When was the debt incurred?	Opened 1/21/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Collection		

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 28 of 66

Debtor Debtor	Paul Peter Salamon, Jr.Nancy Jean Salamon		Case number (if known)	
4.4	CREDIT ONE BANK	Last 4 digits of account number	6847	\$867.00
	Nonpriority Creditor's Name 6801 S CIMARRON RD LAS VEGAS, NV 89113	When was the debt incurred?	Opened 8/17/2018 Last Active 5/1/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Card	d	
4.5	Equifax Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	PO Box 740241 Atlanta, GA 30374 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	ie: Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	13. Offects all triat apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Notice Onl	у	
4.6	Experian Nonpriority Creditor's Name	Last 4 digits of account number		\$0.00
	701 Experian Parkway Allen, TX 75013	When was the debt incurred?		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□ Yes	Other Specify Notice Onl		

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 29 of 66

Debtor Debtor	Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number (if known)	
4.7	FIRST PREMIER Nonpriority Creditor's Name	Last 4 digits of account number	6847	\$386.00
	3820 N LOUISE AVE SIOUX FALLS, SD 57107 Number Street City State Zip Code	When was the debt incurred?	Opened 8/6/2019 Last Active 7/1/2022	
	Who incurred the debt? Check one.	As of the date you file, the claim i		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
		☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card	<u> </u>	
4.8	GM FINANCIAL Nonpriority Creditor's Name	Last 4 digits of account number	0033	\$1,414.00
	PO BOX 181145 ARLINGTON, TX 76096	When was the debt incurred?	Opened 8/8/2013 Last Active 2/22/2020	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	No	Debts to pension or profit-sharin	- •	
	Yes	Other. Specify Auto Loan		
4.9	JPMCB AUTO FINANCE Nonpriority Creditor's Name	Last 4 digits of account number	0033	\$2,712.00
	700 KANSAS LANE MAIL CODE LA 44025 MONROE, LA 71203	When was the debt incurred?	Opened 9/8/2016 Last Active 10/4/2021	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Auto Loan	Deficiency	

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 30 of 66

	Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number (if known)	
4.1 0	KOHLS/CAPITAL ONE	Last 4 digits of account number	6847	\$38.00
	Nonpriority Creditor's Name PO BOX 3115	Opened 5/17/2015 Last Active When was the debt incurred? 7/1/2022		
	MILWAUKEE, WI 53201-3115		Charle all that are by	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Charge Acc	count	
4.1	MERRICK BANK	Last 4 digits of account number	6847	\$642.00
1	Nonpriority Creditor's Name			***
	PO BOX 9201 OLD BETHPAGE, NY 11804	When was the debt incurred?	Opened 8/11/2019 Last Active 3/20/2022	
	Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	MIDLAND CREDIT MANAGEMENT	Last 4 digits of account number	0033	\$800.00
	Nonpriority Creditor's Name 320 E BIG BEAVER STE 300 TROY, MI 48083	When was the debt incurred?	Opened 10/23/2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	Student loans Obligations arising out of a sens	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement of divolce that you did flot	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Collection		

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 31 of 66

Debte Debte	or 1 Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number (if known)	
4.1 3	Northside Hospital	Last 4 digits of account number	0033	\$4,000.00
	Nonpriority Creditor's Name 1000 Johnson Ferry Road NE Atlanta, GA 30342	When was the debt incurred?	2022	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.1 4	SANTANDER CONSUMER USA Nonpriority Creditor's Name	Last 4 digits of account number	0033	\$3,159.00
	961211 FORT WORTH, TX 76161	When was the debt incurred?	Opened 10/19/2018 Last Active 3/20/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify Auto Loan	Deficiency	
4.1 5	SYNCB/TJX CO	Last 4 digits of account number	6847	\$91.00
	Nonpriority Creditor's Name		Opened 12/22/2021 Last Active	
	4125 WINDWARD PLZ ALPHARETTA, GA 30005	When was the debt incurred?	7/1/2022	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	□ Yes	■ Other Specify Charge Acc	count	

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 32 of 66

	1 Paul Peter Salamon, Jr. 2 Nancy Jean Salamon		Case number (if known)		
4.1	Transunion	Last 4 digits of account number		\$0.00	
0	Nonpriority Creditor's Name 2 Baldwin Place PO Box 1000 Crum Lynne, PA 19022	When was the debt incurred?		¥****	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify Notice Only			
4.1	US DEPT OF EDUCATION/GLE Nonpriority Creditor's Name	Last 4 digits of account number	0033	\$116,698.00	
	2401 INTERNATIONAL LANE POB 7859 MADISON, WI 53704	When was the debt incurred?	Opened 11/17/2017 Last Active 6/1/2022		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	Yes	Other. Specify			
		Educationa	<u>I</u>		
4.1 8	US DEPT. OF EDUCATION/GL Nonpriority Creditor's Name	Last 4 digits of account number	0033	\$39,863.00	
	2401 INTERNATIONAL LANE POB 7859 MADISON, WI 53704	When was the debt incurred?	Opened 9/6/2016 Last Active 6/1/2022		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not		
	No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify			
		Educationa	l		

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 33 of 66

1 Paul Peter Salamon, Jr. 2 Nancy Jean Salamon	Case number (if known)	
Yale New Haven Health	Last 4 digits of account number 6847	Unknow
Nonpriority Creditor's Name 789 Howard Ave	When was the debt incurred?	
New Haven, CT 06519 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. ☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	57,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	57,000.00
					Total Claim
Total	6f.	Student loans	6f.	\$	156,561.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
	01	you did not report as priority claims	6g.	\$	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	19,697.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	176,258.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 34 of 66

Fill in this infor	mation to identify your	case:	•	
Debtor 1	Paul Peter Salam	on, Jr.		
	First Name	Middle Name	Last Name	
Debtor 2	Nancy Jean Salar	mon		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF GEORGIA	
Case number (if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			_
	City		State	ZIP Code	_
2.5	/				
	Name				_
	Number	Street			
	City		State	ZIP Code	

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 35 of 66

Fill in th	is informa	ation to identify your	case:	one rage oo or		
Debtor 1		Paul Peter Salam				
Dobtor 2		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		Nancy Jean Salar First Name	Middle Name	Last Name		
United S	tates Banl	cruptcy Court for the:	NORTHERN DISTRIC	T OF GEORGIA		
Case nur	mber					
(if known)					☐ Check if this is a amended filing	n
Officia	al For	m 106H				
		H: Your Cod	ebtors			12/15
people ar fill it out,	re filing to and num	bgether, both are equiple the entries in the	ally responsible for sup	oplying correct information the Additional Page to	s complete and accurate as possible. If two mar on. If more space is needed, copy the Additiona o this page. On the top of any Additional Pages,	ıl Page,
1. Do	o you hav	e any codebtors? (If	you are filing a joint case	, do not list either spouse a	as a codebtor.	
■ No	0					
□ Ye	es					
				property state or territory Juerto Rico, Texas, Washir	? (Community property states and territories includington, and Wisconsin.)	de
■ N	o. Go to lir	ne 3.				
☐ Ye	es. Did yo	ur spouse, former spou	use, or legal equivalent li	ve with you at the time?		
in lir Forn	ne 2 agair	nas a codebtor only i Schedule E/F (Official	f that person is a guara	ntor or cosigner. Make s	if your spouse is filing with you. List the persor sure you have listed the creditor on Schedule D 6G). Use Schedule D, Schedule E/F, or Schedule	(Official
		1: Your codebtor nber, Street, City, State and ZI	P Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	e debt
3.1					☐ Schedule D, line	
	Name				☐ Schedule E/F, line	
					☐ Schedule G, line	
	Number City	Street	State	ZIP Code	-	
3.2					☐ Schedule D, line	
	Name					
5.2	1401110				☐ Schedule E/F, line	
3.2	ramo				☐ Schedule E/F, line	
5.2	Number City	Street	State	ZIP Code		

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

Fill in this informati	on to identify your case:	
Debtor 1	Paul Peter Salamon, Jr.	
Debtor 2 (Spouse, if filing)	Nancy Jean Salamon	
United States Banl	kruptcy Court for the: NORTHERN DISTRICT OF GEORGIA	
Case number (If known)		Check if this is: ☐ An amended filing ☐ A supplement showing postpetition chapter
Official For	<u>rm 106l</u>	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse	
If you have more than one job,	Empleyment status	■ Employed		■ Employed	
attach a separate page with information about additional	Employment status	□ Not employ	red	□ Not employed	
employers.	Occupation	Financial Ad	dviser 1099	Teacher	
Include part-time, seasonal, or self-employed work.	Employer's name	yer's name Bellpoint LLC		Hall County School District	
Occupation may include student or homemaker, if it applies.	Employer's address	881 Lake Av Greenwich,		711 Green St Gainesville, GA 30501	
	How long employed the	here? Sin	ce January 2017	Since August 3, 2022	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,303.00 \$ 4,500.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

	otor 1 otor 2	Paul Peter Salamon, Jr. Nancy Jean Salamon	_		Cas	e number (<i>if k</i>	(nown)	' _					
					Fo	or Debtor 1				Debtor :			
	Cop	by line 4 here	4.		\$	5,30	3.00		\$	4,	500.00	_	
5.	List	t all payroll deductions:											
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	1,16	6.00)	\$	1,0	035.00		
	5b.	Mandatory contributions for retirement plans	5b).	\$	(0.00	_	\$		0.00	_	
	5c.	Voluntary contributions for retirement plans	50).	\$		0.00	_	\$		0.00		
	5d.		50		\$_	(0.00	<u>) </u>	\$		0.00	_	
	5e.	Insurance	5e		\$_		0.00	_	\$		0.00	_	
	5f.	Domestic support obligations	5f		\$_		0.00	_	\$		0.00	_	
	5g.	Union dues	50		\$_		0.00	_	\$		0.00	_	
	5h.	-17	_	1.+	· -		0.00	_	\$		0.00	-	
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,16			\$	1,0	035.00	_	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	4,13	7.00	<u>)</u>	\$	3,	465.00	_	
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	1	\$		0.00		\$		0.00		
	8b.		8b		\$		0.00	_	\$—		0.00	_	
	8c.				\$ \$		0.00	=	\$		0.00	_	
	8d.		80		\$		0.00	_	\$		0.00	_	
	8e.		86		\$		0.00	_	\$		0.00	_	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_		0.00	_	\$		0.00	_	
	8g.	Pension or retirement income	80		\$_		0.00	_	\$		0.00	_	
	8h.	Other monthly income. Specify:	_ 8r	۱.+	\$_		0.00	<u> </u>	_\$		0.00		
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$_	(0.00)	\$		0.0	0	
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,137.00	1+5		3 40	65.00	= \$	7 6	602.00
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		4,101100	11)	_		30.00		-, \	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not ecify:	depe					-		chedule 11.			0.00
12.		d the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certailies								12.	\$		602.00
											Combi monthl		come
13.		you expect an increase or decrease within the year after you file this form No.	?									.y 111'	JUIIG
		Yes. Explain:											

Fill in this inform	nation to identify your case:				
Debtor 1	Paul Peter Salamon, Jr.		Chec	k if this is:	
Bosto. 1	raui retei Saiailioli, Si.			An amended filing	
Debtor 2	Nancy Jean Salamon			A supplement shown 13 expenses as of	ving postpetition chapter
(Spouse, if filing)				13 expenses as or	the following date.
United States Ban	kruptcy Court for the: NORTHERN DISTRICT OF GEO	RGIA	ī	MM / DD / YYYY	
Case number					
(If known)					
Official F	orm 106 l				
	e J: Your Expenses				12/1
Be as complete information. If number (if known	e and accurate as possible. If two married people at more space is needed, attach another sheet to this wn). Answer every question.				r supplying correct
Part 1: Desc	cribe Your Household				
□ No. Go					
Yes. Do	pes Debtor 2 live in a separate household?				
	• • •	. f O	to the Contra	- · · · 0	
	Yes. Debtor 2 must file Official Form 106J-2, Expenses	s for Separate House	noia of Debt	Or Z.	
•	ve dependents? □ No				
Do not list Debtor 2.	Debtor 1 and Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do not stat	e the				□ No
dependent	s names.	Son		19	Yes
		Daughter		19	□ No ■ Yes
		Daugittei			■ Yes ■ No
		Daughter		22	☐ Yes
		Daughtor		25	■ No
3. Do your ex	xpenses include ■ No	Daughter			☐ Yes
	of people other than nd your dependents?				
Estimate your	mate Your Ongoing Monthly Expenses expenses as of your bankruptcy filing date unless y a date after the bankruptcy is filed. If this is a supply.				
Include expens the value of su (Official Form 1	ses paid for with non-cash government assistance in chassistance and have included it on <i>Schedule I</i> : 106I.)	f you know Your Income		Your expe	enses
	or home ownership expenses for your residence. I and any rent for the ground or lot.	nclude first mortgage	4. \$		2,500.00
If not inclu	ided in line 4:				
4a. Real	estate taxes		4a. \$		0.00
4b. Prop	erty, homeowner's, or renter's insurance		4b. \$		0.00
	e maintenance, repair, and upkeep expenses eowner's association or condominium dues		4c. \$ 4d. \$		50.00 0.00
4u. ⊓0⊞	EUWITET 3 ASSUCIATION OF CONTROLLINITUM AUCS		4u. Þ		0.00

5. \$

0.00

Additional mortgage payments for your residence, such as home equity loans

	tor 1 Paul Peter Salamon, Jr.	•	. "	
Deb	tor 2 Nancy Jean Salamon	Case num	nber (if known)	
6.	Utilities:			
0.	6a. Electricity, heat, natural gas	6a.	\$	400.00
	6b. Water, sewer, garbage collection	6b.	·	75.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	527.00
	6d. Other. Specify: Lawn Maintenance	6d.	·	
		ou.	Φ	100.00
_	Pest Control		5	50.00
7.	Food and housekeeping supplies	7.	·	1,000.00
8.	Childcare and children's education costs	8.	· ·	0.00
9.	Clothing, laundry, and dry cleaning	9.	· · —	150.00
	Personal care products and services	10.		150.00
	Medical and dental expenses	11.	\$	150.00
12.	Transportation. Include gas, maintenance, bus or train fare.	12.	¢	500.00
40	Do not include car payments.		·	
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance	15a.	¢	0.00
	15b. Health insurance	15a. 15b.	· ·	630.00
	15c. Vehicle insurance		·	
		15c.		500.00
40	15d. Other insurance. Specify:	15d.	5	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	æ	40.00
47	Specify: Vehicle Emissions and Registration		Φ	10.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	¢	240.00
	• •			310.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	· ·	0.00
4.0	17d. Other. Specify:	17d.	\$	0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		\$	0.00
10	Other payments you make to support others who do not live with you.	. 10.	<u> </u>	0.00
15.	Specify:	19.	Ψ	0.00
20	Other real property expenses not included in lines 4 or 5 of this form or on Sch			
20.	20a. Mortgages on other property	20a.		0.00
	20b. Real estate taxes	20b.	· ·	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20a. 20e.	· ·	0.00
21			+\$	
۷١.	Other: Specify: Investment Analytics Software (Mandatory)		+φ	500.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	7,602.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	· · · · · · · · · · · · · · · · · · ·
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	7,602.00
				7,002.00
23.	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,602.00
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	7,602.00
	23c. Subtract your monthly expenses from your monthly income.	00-	•	0.00
	The result is your monthly net income.	23c.	\$	0.00
0.4	De veu evenet en incresse en decresse in veun en en en en els in the en en els in the entere els en	المدالة المالية	a farma?	
24.	Do you expect an increase or decrease in your expenses within the year after y For example, do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
	modification to the terms of your mortgage?	ii mortyaye	payment to more	ase of ucorease necduse of a
	■ No.			
	Type Explain here:			

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 40 of 66

Fill in this infor	mation to identify your case:		
Debtor 1	Paul Peter Salamon, Jr.		
Debtor 1	First Name Middle Name	Last Name	
Debtor 2	Nancy Jean Salamon		
(Spouse if, filing)	First Name Middle Name	Last Name	
United States Ba	ankruptcy Court for the: NORTHERN DIS	STRICT OF GEORGIA	
Case number (if known)			☐ Check if this is an
Official Fo		viduals Filing Under Chapte	er 7 12/15
creditors have least you must file this whicher	ever is earlier, unless the court extends the		
		oth are equally responsible for supplying correct ir	nformation. Both debtors must
write y	our name and case number (if known).	is needed, attach a separate sheet to this form. On	the top of any additional pages,
	our Creditors Who Have Secured Claims		
1. For any credit information be		D: Creditors Who Have Claims Secured by Property	(Official Form 106D), fill in the
	reditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's C	Connecticut Dept of Revenue	Surrender the property.	■ No
name:	Obrietierus Prins Mannes OT	☐ Retain the property and redeem it.☐ Retain the property and enter into a	☐ Yes
property securing debt	5 Christianna Drive Monroe, CT 06468 Fairfield County	Reaffirmation Agreement. □ Retain the property and [explain]:	_
Creditor's N	NATIONSTAR MORTGAGE LLC	■ Surrender the property.	■ No
name:		Retain the property and redeem it.	– 110
		Retain the property and redeem to	☐ Yes
Description of property securing debt	06468 Fairfield County	Reaffirmation Agreement. Retain the property and [explain]:	_
Creditor's S	SANTANDER CONSUMER U	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No

Retain the property and enter into a

Reaffirmation Agreement.

 \square Retain the property and [explain]:

☐ Yes

property

Description of

miles

2015 VW Passat SE 110,000

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 41 of 66

Debtor 1 Debtor 2	Paul Peter Salamon, Jr. Nancy Jean Salamon	Case number (if known)
securin	ng debt:	
Part 2:	List Your Unexpired Personal Property Leases	
in the info	rmation below. Do not list real estate leases. Ur	I in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill nexpired leases are leases that are still in effect; the lease period has not yet ended. the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe	your unexpired personal property leases	Will the lease be assumed?
Lessor's r	name:	□ No
Description Property:	on of leased	☐ Yes
Lessor's r	name.	□ No
	on of leased	
riopeity.		☐ Yes
Lessor's r	name: on of leased	□ No
Property:	on or leased	☐ Yes
Lessor's r		□ No
Description Property:	on of leased	☐ Yes
Lessor's r	name:	□ No
Description Property:	on of leased	☐ Yes
Lessor's r	name:	□ No
	on of leased	
Property:		☐ Yes
Lessor's r		□ No
Property:	on of leased	☐ Yes
Part 3:	Sign Below	
	nalty of perjury, I declare that I have indicated m	ry intention about any property of my estate that secures a debt and any personal
χ /s/ F	Paul Peter Salamon, Jr.	χ /s/ Nancy Jean Salamon
	I Peter Salamon, Jr. ature of Debtor 1	Nancy Jean Salamon Signature of Debtor 2
Date	September 1, 2022	Date September 1, 2022

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main

	'	Docume	nt Page 42 of 66		
Fill in this inform	nation to identify yo	ur case:			
Debtor 1	Paul Peter Sala	•			
	First Name	Middle Name	Last Name		
Debtor 2	Nancy Jean Sa	lamon			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar Case number (if known)	nkruptcy Court for the	: NORTHERN DISTRICT	OF GEORGIA		1. Chash if this is an
(II KIIOWII)				L	Check if this is an amended filing
	rm 106Sum	s and I iahilities an	nd Certain Statistica	I Information	12/15
ounninary o	i i oui Assets	and Liabilities an	d Certain Statistica	inioniation	12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
		value C	or what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	560,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	26,360.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	586,360.0
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	751,676.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	57,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	176,258.0
	Your total liabilities	\$	984,934.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,602.0
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	7,602.0
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and s	ubmit this form to

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Mair Document Page 43 of 66

Debtor 1
Debtor 2
Paul Peter Salamon, Jr.
Nancy Jean Salamon
the court with your other schedules.

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

10,389.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	57,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	156,561.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	213,561.00

Fill in this infor	mation to identify your case:		
Debtor 1	• • • • • • • • • • • • • • • • • • • •		
Deploi i	Paul Peter Salamon, Jr. First Name Midd	lle Name Last Name	
Debtor 2	Nancy Jean Salamon	Last Harne	
(Spouse if, filing)		lle Name Last Name	
United States Ba	ankruptcy Court for the: NORTHE	ERN DISTRICT OF GEORGIA	
Case number			
(if known)			Check if this is an amended filing
f two married pe	tion About an Ind	equally responsible for supplying correct information of the schedules or amended schedules. Making a false	
	y or property by fraud in connecti 8 U.S.C. §§ 152, 1341, 1519, and 3	on with a bankruptcy case can result in fines up to \$25 1571.	50,000, or imprisonment for up to 20
Sign	n Below		
Did you pa	y or agree to pay someone who is	s NOT an attorney to help you fill out bankruptcy forms	s?
■ No			
☐ Yes. I	Name of person		Bankruptcy Petition Preparer's Notice, ation, and Signature (Official Form 119)
	alty of perjury, I declare that I have e true and correct.	e read the summary and schedules filed with this decla	aration and
X Iel Day	ıl Peter Salamon, Jr.	X /c/ Nancy Jean Salamon	
	eter Salamon, Jr.	X /s/ Nancy Jean Salamon Nancy Jean Salamon	
	re of Debtor 1	Signature of Debtor 2	
Date :	September 1, 2022	Date September 1, 2022	2

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 45 of 66

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Georgia

In re	Paul Peter Salamon, Jr. Nancy Jean Salamon		Case No.	
	, , , , , , , , , , , , , , , , , , , ,	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION	ON OF ATTO	RNEY FOR DI	EBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certificompensation paid to me within one year before the filing of the per rendered on behalf of the debtor(s) in contemplation of or in contemplation.	etition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$ <u></u>	4,000.00
	Prior to the filing of this statement I have received			0.00
	Balance Due		\$	4,000.00
. Т	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
Т	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
	I have not agreed to share the above-disclosed compensation w	-	•	-
[☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the			
I	In return for the above-disclosed fee, I have agreed to render legal	service for all aspect	ts of the bankruptcy	ease, including:
b c	Analysis of the debtor's financial situation, and rendering advices. Preparation and filing of any petition, schedules, statement of a Representation of the debtor at the meeting of creditors and confidence [Other provisions as needed] Helping client obtain pre-filing credit briefing	ffairs and plan which	n may be required;	
	Helping client obtain pay advices Helping client obtain tax transcripts/returns Initial Intake Changes of address			
	Pre-confirmation turn-over proceedings Stop creditor actions against client			
	Motion to Extend Stay or to Impose Stay Motion for finding of Exigent Circumstances			
	Obtaining Employment Deduction Order and ser	ving on employer		
	Order to Vacate Employer Deduction Order			
	341 Hearing and Reset Hearing Confirmation Hearing and Reset Confirmation He	earing		
	Modifications necessary to confirm plan	-		

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Provide information in obtaining pre-discharge financial counseling certificate

Lien avoidances necessary to confirm plan Objections to claim necessary to confirm plan Letter requesting suspension of plan payments Bar date review (and all resulting/related pleadings)

Post-Confirmation amendment to add creditors Trustee or creditor motions to modify plan

Objections to Late-Filed Claims

Post-confirmation modification of plan payments \$350.00
Post-confirmation MFRS for non-payment or no insurance \$350.00
Post-confirmation MFRS re: payment disputes \$500.00
Motion to sell property of the estate \$500.00

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 46 of 66

In re	Paul Peter Salamon, Jr. Nancy Jean Salamon	Case No.	
	Debtor(s)		

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

(Continuation Sheet)

Application to employ professional \$500.00

Motion for Approval of Compromise and/or Settlement Proceeds \$500.00

Application for outside loan/Motion to refinance, modify loan, or incur debt \$500.00

Post-bar date review Trustee Motion to Dismiss \$500.00

Post-confirmation stay violations \$500.00

Motion to sever/dismiss as to one joint debtor \$500.00

Motion to reopen or vacate dismissal or reconsider dismissal \$500.00

Motion to re-impose stay \$500.00

Motion to retain tax refund \$500.00

Trip to courthouse to obtain a copy of a judgment \$300.00

Motion to Determine Claim Status of Claim and Release Lien \$2,500.00

Adversary Proceedings \$350/hr

Appellate Practice \$350/hr Evidentiary Hearings (hourly)

Appellate practice (hourly) \$350/hr

Adversary Proceeding for violation of Automatic Stay \$1,000.00 or

33% of recovered punitive or exemplary damages, whichever is greater, in addition to \$350/hr.

Adversary Proceeding for violation of Bankruptcy discharge \$500.00 or

33% of recovered punitive or exemplary damages, whichever is greater, in addition to \$350/hr.

Any services not specifically set forth above or in the Attorney-Client Agreement are deemed to fall within the Base-Fee Category

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

September 1, 2022

Date

/s/ Charles M. Clapp

Charles M. Clapp 101089

Signature of Attorney

Law Offices of Charles Clapp

5 Concourse Parkway NE

Suite 3000

Atlanta, GA 30328

404-585-0040 Fax: 404-393-8893

charles@lawcmc.com

Name of law firm

United States Bankruptcy Court Northern District of Georgia

	Paul Peter Salamon, Jr.		C N	
In re	Nancy Jean Salamon		Case No.	
		Debtor(s)	Chapter	_7
The ab		IFICATION OF CREDITOR that the attached list of creditors is true and of		of their knowledge.
Date:	September 1, 2022	/s/ Paul Peter Salamon, Jr. Paul Peter Salamon, Jr.		
		r dui r ctcr Galamon, or.		
		Cignoture of Dobtor		
Date:	September 1, 2022	Signature of Debtor /s/ Nancy Jean Salamon		

Signature of Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$78	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this info	rmation to identify your case:					irected in	n this form and	in Form
Debtor 1	Paul Peter Salamon, Jr.		122	2A-1Supp	D:			
Debtor 2								
(Spouse, if filing)	Nancy Jean Salamon		_ '	□ 1. The	re is no pres	umption	of abuse	
United States	Bankruptcy Court for the: Northern District o	f Georgia						nption of abuse
Officed States	Bankruptcy Court for the. Northern District of	i Georgia					der <i>Chapter 7</i> N	∕leans Test
Case number			.	_	lculation (Off		,	
(if known)							ot apply now be but it could app	
				☐ Chec	k if this is a	n amen	ided filing	
Official F	Form 122A - 1							
Chapter	7 Statement of Your Cur	rent Mon	thly Inc	ome				12/19
attach a separa case number (if qualifying milita	and accurate as possible. If two married people at te sheet to this form. Include the line number to w known). If you believe that you are exempted fro ary service, complete and file Statement of Exemp alculate Your Current Monthly Income	hich the additiona m a presumption o	al information a of abuse becau	ipplies. O se you do	n the top of a	ny addition	onal pages, write nsumer debts or	e your name and r because of
1. What is	your marital and filing status? Check one or	ıly.						
☐ Not n	narried. Fill out Column A, lines 2-11.							
■ Marri	ed and your spouse is filing with you. Fill ou	ut both Columns A	A and B, lines	2-11.				
	ed and your spouse is NOT filing with you.							
_	ring in the same household and are not lega			lumns A	and B. lines 2	2-11.		
_	ring separately or are legally separated. Fill				•		na this box, you	declare under
ре	enalty of perjury that you and your spouse are ling apart for reasons that do not include evadir	egally separated	under nonban	kruptcy la	aw that applic	es or tha		
101(10A). Fo the 6 months	rerage monthly income that you received from all or example, if you are filing on September 15, the 6-ms, add the income for all 6 months and divide the total of the same rental property, put the income from that p	onth period would b	oe March 1 throu ult. Do not includ	ugh Augus de any inco	t 31. If the amo	ount of you ore than o	ur monthly incomonce. For exampl	e varied during e, if both
				Column Debtor		Colum Debto non-fi		
	oss wages, salary, tips, bonuses, overtime, eductions).	and commissior	ns (before all	\$	5,303.00	\$	4,773.00	
Column I	r and maintenance payments. Do not include B is filled in.			\$	0.00	\$	0.00	
of you o from an u and roon	unts from any source which are regularly par r your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular of, your dependent	contributions ts, parents,	\$	0.00	\$	0.00	
5. Net inco	me from operating a business, profession,	or farm						
		Debte	or 1					
Gross re	ceipts (before all deductions)	\$ 0.00						
Ordinary	and necessary operating expenses	-\$ 0.00		_	0.00	•	0.00	
	thly income from a business, profession, or far	m \$0.00_	Copy here ->	\$	0.00	\$	0.00	
6. Net inco	me from rental and other real property	Delta	o v 1					
		\$ 0.00	or T					
	ceipts (before all deductions)	\$ 0.00 -\$ 0.00						
•	and necessary operating expenses	*	Copy here ->	\$	0.00	\$	0.00	
	thly income from rental or other real property	\$	-5py 11616 ->	\$	0.00	\$	0.00	
/ Intorcot	antigonde and rovaltice			.0	0.00		0.00	

7. Interest, dividends, and royalties

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 53 of 66

Paul Peter Salamon, Jr.

Debtor 1

Nancy Jean Salamon Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 For your spouse 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.. Bonus 0.00 250.00 0.00 63.00 Year End Total amounts from separate pages, if any. 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 5.303.00 5,086.00 \$ \$ 10,389.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 10.389.00 Multiply by 12 (the number of months in a year) x 12 124,668.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. GA Fill in the number of people in your household. 4 96.622.00 Fill in the median family income for your state and size of household. 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Paul Peter Salamon, Jr. X /s/ Nancy Jean Salamon Paul Peter Salamon, Jr. Nancy Jean Salamon

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 54 of 66

Deblor	Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number (if known)	
	Signature of Debtor 1		Signature of Debtor 2	
Dat	September 1, 2022	Date	September 1, 2022	
	MM/DD/YYYY		MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this	form.		

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 55 of 66

	btor 1 Paul Peter Salamon, Jr.	Check the appropriate box as directed in lines 40 or 42:
1	btor 2 Nancy Jean Salamon	According to the calculations required by this Statement:
` '	•	■ 1. There is no presumption of abuse.
Uni	ited States Bankruptcy Court for the: Northern District of	☐ 2 There is a presumption of abuse
	se numberknown)	
	,	☐ Check if this is an amended filing
<u>Of</u>	ficial Form 122A - 2	
Cł	napter 7 Means Test Calculation	n 04/3
To f	ill out this form, you will need your completed copy of	f Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).
spa add		people are filing together, both are equally responsible for being accurate. If more lude the line number to which additional information applies. On the top any nown).
1.	Copy your total current monthly income.	Copy line 11 from Official Form 122A-1 here=> \$ 10,389.00
2.	Did you fill out Column B in Part 1 of Form 122A-1? ☐ No. Fill in \$0 for the total on line 3.	
	■ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	Yes. Fill in \$0 for the total on line 3.	
3.	household expenses of you or your dependents. Follo	any part of your spouse's income not used to pay for the illow these steps: t of the income you reported for your spouse NOT regularly used for the household
	_	
	No. Fill in 0 for the total on line 3.	
	☐ Yes. Fill in the information below:	
	State each purpose for which the income was upon example, the income is used to pay your spous support other than you or your dependents.	and and the attention to an
		\$
		\$
		\$
	Total.	\$ <u>0.00</u>
		Copy total here=> \$ 0.00
4.	Adjust your current monthly income. Subtract line 3 fi	from line 1. \$ 10,389.00

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 56 of 66

ebtor 1 ebtor 2	Paul Peter Salamon, Jr. Nancy Jean Salamon		Case number	(if known)					
art 2:	Calculate Your Deductions from Your Income								
to ans	nternal Revenue Service (IRS) issues National and L swer the questions in lines 6-15. To find the IRS star actions for this form. This information may also be a	ndards, go online i	using the link speci	fied in the separate	unts				
your a	ct the expense amounts set out in lines 6-15 regardless actual expenses if they are higher than the standards. De in line 3 and do not deduct any operating expenses the	o not deduct any an	nounts that you subtr	acted from your spouse's	3				
If your	If your expenses differ from month to month, enter the average expense.								
When	ever this part of the from refers to you, it means both yo	u and your spouse	if Column B of Form	122A-1 is filled in.					
5. 1	The number of people used in determining your ded	uctions from incor	me						
p	Fill in the number of people who could be claimed as exolus the number of any additional dependents whom you he number of people in your household.								
Natio	nal Standards You must use the IRS Nationa	Standards to answ	er the questions in li	nes 6-7.					
	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and		in line 5 and the IRS	S National \$	1,900.00				
ti p	Out-of-pocket health care allowance: Using the numb he dollar amount for out-of-pocket health care. The numbeople who are 65 or olderbecause older people have higher than this IRS amount, you may deduct the addition	nber of people is spl a higher IRS allowa	it into two categories ince for health care o	people who are under 6	5 and				
Peopl	e who are under 65 years of age								
7	'a. Out-of-pocket health care allowance per person	\$ 75.00							
7	b. Number of people who are under 65	X4							
7	c. Subtotal. Multiply line 7a by line 7b.	\$300.00	Copy here=	» \$ <u>300.00</u>					
Peopl	le who are 65 years of age or older								
7	d. Out-of-pocket health care allowance per person	\$ 153.00							
7	e. Number of people who are 65 or older	X 0							
7	rf. Subtotal. Multiply line 7d by line 7e.	\$ 0.00	Copy here=	÷ +\$0.00					
7	g. T otal. Add lines 7c and 7f		\$300.00	Copy total here=>	\$300.00				

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 57 of 66

Debtor 1 Paul Peter Salamon, Jr. Nancy Jean Salamon

Case number (if known)

Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15.

		n information from the IRS, the U.S. Trustee Program tcy purposes into two parts:	n has divi	ided the IRS L	ocal Stand	lard for housi	ng for		
■ F	lousi	ing and utilities - Insurance and operating expenses							
-	lousi	ing and utilities - Mortgage or rent expenses							
To a	nsw	er the questions in lines 8-9, use the U.S. Trustee Pr	ogram ch	nart.					
		the chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office.	e instruction	ons for this forr	n.				
8.	Hou in th	using and utilities - Insurance and operating expense the dollar amount listed for your county for insurance and	es: Using operating	the number of expenses	people you	entered in line	e 5, fill \$		785.00
9.	Hou	ising and utilities - Mortgage or rent expenses:							
	9a.	Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses				\$ 1	,619.00		
	9b.	Total average monthly payment for all mortgages and o	other debt	s secured by y	our home.				
		To calculate the total average monthly payment, add all contractually due to each secured creditor in the 60 mo for bankruptcy. Then divide by 60.							
		Name of the creditor	Averaç payme	ge monthly ent					
		NATIONSTAR MORTGAGE LLC	\$	500.00					
		Total average monthly payment	\$	500.00	Copy here=>	-\$	500.00	Repeat this	:
		rotal average monthly payment	Ψ	300.00	nere=>	-φ	300.00	line 33a.	
	9c.	Net mortgage or rent expense.							
		Subtract line 9b (total average monthly payment) from I or rent expense). If this amount is less than \$0, enter \$6			\$	1,119.00	Copy here=>	\$	1,119.00
10.		ou claim that the U.S. Trustee Program's division of t					t and	\$	0.00
	Ex	plain why:							
11.	Loc	al transportation expenses: Check the number of vehi	cles for w	hich you claim	an ownersl	hip or operatin	g expense		
). Go to line 14.							
	□ 1	. Go to line 12.							
	2 2	or more. Go to line 12.							
12.		icle operation expense: Using the IRS Local Standards rating expenses, fill in the Operating Costs that apply for						\$	640.00

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 58 of 66

Paul Peter Salamon, Jr. Debtor 1 **Nancy Jean Salamon** Debtor 2 Case number (if known) Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 2003 Saab 9-3 Linear 140,000 miles 13a. Ownership or leasing costs using IRS Local Standard..... 200.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you filed for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 line 33b. Copy net 13c. Net Vehicle 1 ownership or lease expense Vehicle 1 Subtract line 13b from line 13a, if this amount is less than \$0, enter \$0, expense 200.00 200.00 \$ here => \$ Vehicle 2 Describe Vehicle 2: 2015 VW Passat SE 110,000 miles 13d. Ownership or leasing costs using IRS Local Standard..... 588.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment SANTANDER CONSUMER U 201.33 Copy Repeat this here amount on **Total Average Monthly Payment** 201.33 201.33 line 33c. Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this amount is less than \$0, enter \$0, expense 288.33 288.33 here => \$ 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the Public 0.00 Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 59 of 66

Paul Peter Salamon, Jr.

Debtor 2

Nancy Jean Salamon

Case number (if known)

Oth		In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for	
16.	self-employment taxes, soci your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 om the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	sales, or use taxes.	\$	3,500.00
17.	Involuntary deductions: To contributions, union dues, at	he total monthly payroll deductions that your job requires, such as retirement nd uniform costs.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	500.00
18.	filing together, include paym	nonthly premiums that you pay for your own term life insurance. If two married people are nents that you make for your spouse's term life insurance. Do not include premiums for life ints, for a non-filing spouse's life insurance, or for any form of life insurance other than	\$	0.00
19.		The total monthly amount that you pay as required by the order of a court or as spousal or child support payments.		
	Do not include payments on	past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	lly amount that you pay for education that is either required:		
	_ ′ ′	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total monthl	y amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	r any elementary or secondary school education.	\$	0.00
22.	that is required for the health	benses, excluding insurance costs: The monthly amount that you pay for health care h and welfare of you or your dependents and that is not reimbursed by insurance or paid it. Include only the amount that is more than the total entered in line 7.		0.00
	Payments for health insuran	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	for you and your dependents	lephone services: The total monthly amount that you pay for telecommunication services s, such as pagers, call waiting, caller identification, special long distance, or business cell necessary for your health and welfare or that of your dependents or for the production of ed by your employer.		
	. ,	r basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.	lowed under the IRS expense allowances.	\$	9,232.33

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 60 of 66

Debtor 1 Debtor 2 Paul Peter Salamon, Jr.
Nancy Jean Salamon Case number (if known)

Δdd	itional Expense Deductions	These are additional de	duction	s allowed by th	a Maans Tast		
Auu	Itional Expense Deductions			•			
		Note: Do not include ar					
25.					ses. The monthly expenses for health y necessary for yourself, your spouse, or		
	Health insurance		\$	650.00			
	Disability insurance		\$	0.00			
	Health savings account		+ \$	0.00			
]		
	Total		\$	650.00	Copy total here=>	\$	650.00
	Do you actually spend this total a	amount?			J		
	☐ No. How much do you ad	ctually spend?					
	Yes		\$				
26.	continue to pay for the reasonab	le and necessary care a ur immediate family who	ind supp o is unal	oort of an elderl ble to pay for su	actual monthly expenses that you will y, chronically ill, or disabled member of uch expenses. These expenses may 9A(b).	\$	0.00
27.					nses that you incur to maintain the es Act or other federal laws that apply.		
	By law, the court must keep the	nature of these expense	s confid	lential.		\$	0.00
28.	Additional home energy costs	Your home energy cos	ts are in	cluded in your	insurance and operating expenses on		
	8, then fill in the excess amount	of home energy costs. documentation of your			nergy costs included in expenses on line ou must show that the additional	\$	0.00
29.	\$189.58* per child) that you pay public elementary or secondary	for your dependent child school. documentation of your	dren who	o are younger to xpenses, and y	e monthly expenses (not more than han 18 years old to attend a private or ou must explain why the amount 23.		
	* Subject to adjustment on 4/01/2	25, and every 3 years af	ter that	for cases begu	n on or after the date of adjustment.	\$	0.00
30.		nd clothing allowances i allowances in the IRS N	n the IR National	S National Star Standards.	ctual food and clothing expenses are ndards. That amount cannot be more		
	instructions for this form. This ch You must show that the addition	art may also be availabl	e at the	bankruptcy cle	rk's office.	\$	0.00
31.	Continuing charitable contributionstruments to a religious or char				ntribute in the form of cash or financial	+\$	0.00
32.	Add all of the additional exper Add lines 25 through 31.	se deductions.				\$	650.00

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 61 of 66

Debtor 1 Debtor 2 Paul Peter Salamon, Jr.
Nancy Jean Salamon Case number (if known)

Dedu	ctions	for Debt Payment							
		s that are secured by an interest of the secured debt, fill in li	est in property that you own, including hon	ne mo	rtgag	jes, vehicle			
			ayment, add all amounts that are contractually bankruptcy. Then divide by 60.	due to	o eacl	h secured			
	Morto	gages on your home:							erage monthly yment
33a.	Сору	line 9b here					=>	\$	500.00
		s on your first two vehicles:							
33b.	Сору	line 13b here					=>	\$_	0.00
33c.							=>	\$	201.33
33d.		ther secured debts:							
Name	of each	creditor for other secured debt	Identify property that secures the debt			Does payme include taxes insurance?			
						□ No			
	-NON	E-				☐ Yes		\$	
-						— 103		Ψ_	
						□ No			
						☐ Yes		\$	
						П №			
						☐ Yes	_	+\$_	
33e.	Total a	verage monthly payment. Add I	ines 33a through 33d	\$ ₋		701.33	to	opy tal ere=>	\$ 701.33
	r other		secured by your primary residence, a vehi upport or the support of your dependents?						
	Yes.		st pay to a creditor, in addition to the payments assion of your property (called the <i>cure amount</i> a information below.						
Nam	e of the	creditor	Identify property that secures the debt			otal cure mount			Monthly cure amount
-NO	NE-				\$		÷ 60	= \$	
							- -		
			То	tal \$		0.00	to	opy tal ere=>	\$ 0.00
			s a priority tax, child support, or alimony - ur bankruptcy case? 11 U.S.C. § 507.	that					
	I No.	Go to line 36.	-						
	_	Fill in the total amount of all of ongoing priority claims, such a	these priority claims. Do not include current or sthose you listed in line 19.	r					
		Total amount of all past-due p	priority claims	\$		57,000.00	<u> -</u> 6	0 –	\$ 950.00

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 62 of 66

Paul Peter Salamon, Jr.

Debtor 1

Nancy Jean Salamon Debtor 2 Case number (if known) 36. Are you eligible to file a case under Chapter 13? 11 U.S.C. § 109(e). For more information, go online using the link for Bankruptcy Basics specified in the separate instructions for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office. ■ No. Go to line 37. Yes. Fill in the following information. Projected monthly plan payment if you were filing under Chapter 13 500.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees 6.00 (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 30.00 30.00 here=> Average monthly administrative expense if you were filing under Chapter 13 \$ 1.681.33 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 9,232.33 expense allowances Copy line 32, All of the additional expense deductions 650.00 Copy line 37, All of the deductions for debt payment +\$ 1,681.33 Total deductions 11,563.66 11.563.66 Copy total here=> Part 3: Determine Whether There is a Presumption of Abuse 39. Calculate monthly disposable income for 60 months 39a. Copy line 4, adjusted current monthly income 10,389.00 39b. Copy line 38, Total deductions 11,563.66 39c. Monthly disposable income. 11 U.S.C. § 707(b)(2). Copy Subtract line 39b from line 39a -1.174.66 -1.174.66 here=>\$ For the next 60 months (5 years) x 60 Сору -70,479.60 -70,479.60 39d. Total. Multiply line 39c by 60 39d. here=> 40. Find out whether there is a presumption of abuse. Check the box that applies: ■ The line 39d is less than \$9,075*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Go to Part 5. ☐ The line 39d is more than \$15,150*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. You may fill out Part 4 if you claim special circumstances. Go to Part 5. ☐ The line 39d is at least \$9,075*, but not more than \$15,150*. Go to line 41. *Subject to adjustment on 4/01/25, and every 3 years after that for cases filed on or after the date of adjustment.

Case 22-56984-pmb Doc 1 Filed 09/02/22 Entered 09/02/22 15:54:05 Desc Main Document Page 63 of 66

Debtor 1 Debtor 2		Peter Salamon, Jr. cy Jean Salamon	Case num	ber (<i>if known</i>)		
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If A Summary of Your Assets and Liabilities and Certain Statistical Schedules (Official Form 106Sum), you may refer to line 3b on the	nformation at form. \$_	x .25]	
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707 Multiply line 41a by 0.25			Copy here=>	\$
25	% of y	ne whether the income you have left over after subtracting all our unsecured, nonpriority debt. e box that applies:		ns is enough to pa	ny	
		39d is less than line 41b. On the top of page 1 of this form, check part 5.	box 1, <i>There is no</i>	presumption of al	use.	
		39d is equal to or more than line 41b. On the top of page 1 of th <i>umption of abuse.</i> You may fill out Part 4 if you claim special circun				
Part 4:	Giv	ve Details About Special Circumstances				
reaso	onable lo. Go les. Fill itel You	we any special circumstances that justify additional expenses a alternative? 11 U.S.C. § 707(b)(2)(B). To to Part 5. I in the following information. All figures should reflect your average m. You may include expenses you listed in line 25. The must give a detailed explanation of the special circumstances the cessary and reasonable. You must also give your case trustee documents.	monthly expense	or income adjustmo	ent for ea	ach
	G	tive a detailed explanation of the special circumstances		e monthly expens me adjustment	se	
	_		\$			
	_		\$			
	_		\$			
	_		\$			
Part 5:	Sig	ın Below				
	By si	gning here, I declare under penalty of perjury that the information of	n this statement ar	nd in any attachme	nts is true	and correct.
	X /s/	Paul Peter Salamon, Jr. X	s/ Nancy Jean S	Salamon		
			Nancy Jean Sal Signature of Debto			
Da	te Se	eptember 1, 2022 Date	September 1, 2 MM / DD / YYYY		_	

ATLANTIC COLLECTION 194 BOSTON POST RD E LYME, CT 06333

BARCLAYS BANK DELAWA 125 S WEST ST WILMINGTON, DE 19801

Connecticut Dept of Revenue 450 Columbus Blvd, Ste 1 Hartford, CT 06103

CREDIT COLLECTION SERVICE PO BOX 607 NORWOOD, MA 02062

CREDIT ONE BANK 6801 S CIMARRON RD LAS VEGAS, NV 89113

Equifax PO Box 740241 Atlanta, GA 30374

Experian 701 Experian Parkway Allen, TX 75013

FIRST PREMIER 3820 N LOUISE AVE SIOUX FALLS, SD 57107

Georgia Department of Revenue Bankruptcy Section 1800 Century Blvd NE Ste 9100 Atlanta, GA 30345 GM FINANCIAL PO BOX 181145 ARLINGTON, TX 76096

Internal Revenue Service Centralized Insolvency Opera PO Box 7346 Philadelphia, PA 19101-7346

JPMCB AUTO FINANCE 700 KANSAS LANE MAIL CODE LA 44025 MONROE, LA 71203

KOHLS/CAPITAL ONE PO BOX 3115 MILWAUKEE, WI 53201-3115

MERRICK BANK PO BOX 9201 OLD BETHPAGE, NY 11804

MIDLAND CREDIT MANAGEMENT 320 E BIG BEAVER STE 300 TROY, MI 48083

NATIONSTAR MORTGAGE LLC 350 HIGHLAND HOUSTON, TX 77067

Northside Hospital 1000 Johnson Ferry Road NE Atlanta, GA 30342

SANTANDER CONSUMER U 8585 N STEMMONS FWY STE 1100 N DALLAS, TX 75247 SANTANDER CONSUMER USA 961211 FORT WORTH, TX 76161

SYNCB/TJX CO 4125 WINDWARD PLZ ALPHARETTA, GA 30005

Transunion 2 Baldwin Place PO Box 1000 Crum Lynne, PA 19022

US DEPT OF EDUCATION/GLE 2401 INTERNATIONAL LANE POB 7859 MADISON, WI 53704

US DEPT. OF EDUCATION/GL 2401 INTERNATIONAL LANE POB 7859 MADISON, WI 53704

Yale New Haven Health 789 Howard Ave New Haven, CT 06519